CLAIMS ONLY

10-19-05

Application Number	Filing Date
10-684377	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1			1				51						
2							52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
9			1				59						
10							60						
11							61						
12							62						
13			1				63						
14							64						
15							65						
16							66						
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42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
Total Indep			3				Total Indep						
Total Depend			16				Total Depend						
Total Claims			19				Total Claims						